

COVER PAGE

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)

Norman

Bryan

2018 MAR -1 PM 1:39

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1. Office, Agency, or Court

Agency Name (Do not use acronyms)

State of California Natural Resources Agency

Division, Board, Department, District, if applicable

Your Position

Division of oil Gas and Geothermal Resources

► If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

Agency: _____

Position: Associate Oil + Gas Engineer

2. Jurisdiction of Office (Check at least one box)

☒ State

☐ Judge or Court Commissioner (Statewide Jurisdiction)

☐ Multi-County _____

☐ County of _____

☐ City of _____

☐ Other _____

3. Type of Statement (Check at least one box)

☒ Annual: The period covered is January 1, 2017, through December 31, 2017.

☐ Leaving Office: Date Left _____
(Check one)

-or-

The period covered is _____ through December 31, 2017.

☐ The period covered is January 1, 2017, through the date of leaving office.

-or-

☐ The period covered is _____ through the date of leaving office.

☐ Assuming Office: Date assumed _____

☐ Candidate: Date of Election _____ and office sought, if different than Part 1: _____

4. Schedule Summary (must complete) ► Total number of pages including this cover page: _____

Schedules attached

☐ Schedule A-1 - Investments - schedule attached

☐ Schedule C - Income, Loans, & Business Positions - schedule attached

☐ Schedule A-2 - Investments - schedule attached

☐ Schedule D - Income - Gifts - schedule attached

☐ Schedule B - Real Property - schedule attached

☐ Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

☒ None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE
(Business or Agency Address Recommended - Public Document)

195 S. Broadway ST

Orcutt

CA

93455

DAYTIME TELEPHONE NUMBER

(805) 937-7246

E-MAIL ADDRESS

Bryan.Norman@Conservation.CA.gov

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I acknowledge this is a public document.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 2/23/18
(month, day, year)

Signature Bryan Norman
(file the originally signed statement with your filing official.)